



STUDIES

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HEALTH STATUS OF NATIVE AMERICANS IN NORTH CAROLINA

ABSTRACT

Generally, the health of North Carolina's Native American population appears better than that of Blacks but worse than that of Whites. However, compared to both Whites and Blacks, the Native American population has experienced low abortion utilization (in total and for teenagers) and excesses in low maternal education, maternal smoking, and birth defects (especially musculoskeletal defects and hypospadias). In addition, Indian mothers in the reservation counties (Graham, Jackson, and Swain) are shown to experience excesses in young maternal age, death of a previous liveborn infant, diabetes, hypertension, and Cesarean section.

The state's Native American median age at death is particularly low for non-motor-vehicle unintentional injuries, liver disease/cirrhosis, and suicide. Disproportionate mortality at ages 1-24 and from diabetes and motor-vehicle-injuries is observed. Also, compared to others, the state's Native American decedents are more likely to be Dead on Arrival, to die as hospital outpatients, to have death certified by a medical examiner, and to be autopsied.

Compared to the Year 2000 national health objectives for Native Americans, the state's Native American population is experiencing a much lower proportion of prenatal care in the first trimester and excesses in infant mortality, diabetes-related mortality, homicide, and the tuberculosis case rate.

This study points out the need for oversampling of Native Americans in sample surveys, the collection of race in hospital discharge reporting, and more accurate reporting of race in general.

